STATEMENT OF

FORM 1	ORGANIZ (See instruction			Office use only
NAME OF COMMITTEE (in the community of the community	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Campaign for	Change 			
ADDRESS (number and s	street) 202 Bonham Rd			
(Check if address is changed)				
	Dedham		MA	02026 -
		CITY	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e	-mail address)		
(Check if address is changed)	info@campaign-4-c	hange.org		
COMMITTEE'S WEB (Check if address is changed)	PAGE ADDRESS (URL)			
2. DATE M M M O 3	21 2009	C C00441501		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)		
I certify that I have exami	ned this Statement and to the best of my kn	owledge and belief it is true, corre	ct and complete	
Type or Print Name of	Treasurer Nickolai Bobrov	,		
Signature of Treasurer	Electronically Filed by Nickolai	Bobrov	Date 03	21 Y 2009
NOTE: Submission of fal	se, erroneous, or incomplete information ma	ay subject the person signing this	•	_
Office Use Only		For further informat Federal Election Com Toll Free 800-424-95	mission	FEC FORM 1 (Revised 02/2009)